

The Indicative Sanctions Policy – the public’s view

Research aims

The HCPC’s Indicative Sanctions Policy sets out the principles that panels should consider when deciding what, if any sanction should be applied. The over-arching aim of the research was to explore the public’s view on the principles that under-pin the Indicative Sanctions Policy

Research methods

The research used a qualitative method, which involved eight mini-group discussions and eight in-depth interviews. Sessions were carried out in London, Belfast, Cardiff and Manchester between the 25th September and 3rd October 2017.

Summary of findings

Types of case participants considered to be serious

Participants felt that cases involving the following were particularly serious:

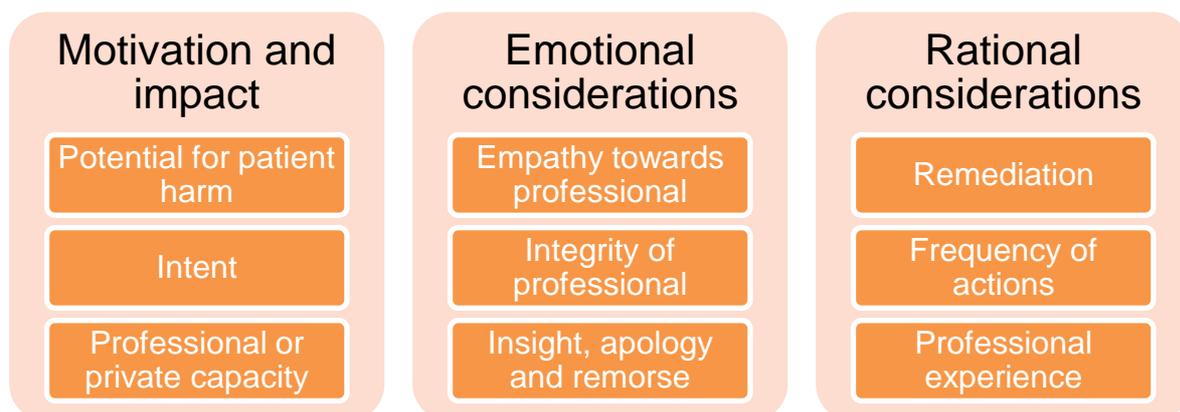
- Child pornography
- Sexual misconduct
- Violence or abuse
- Breach of trust, especially where driven by an intentional act of dishonesty
- Involvement of a vulnerable service user

Sanctions

Participants considered sanctions should be tailored to individual cases, with the most serious sanctions reserved for the most serious cases. They assumed that cases involving incompetence would involve some element of retraining.

Mitigating and aggravating factors

Participants felt that mitigating and aggravating factors fall in to three broad groups



Motivation and impact

Intentional and harmful acts clearly linked to working duties are the most serious aggravating factors. Where more than one of these factors is present in a case, there is very little expectation that anything can mitigate concerns about the professional continuing to practise.

Emotional considerations

Empathy with rationale for a behaviour, and perceived integrity of the professional can act as mitigating factors.

Insight, apology and remorse are closely linked but have limited impact for the most serious and severe cases. It is clear that authenticity of apology, remorse and insight is a concern for participants. Remediation is often considered a more empirical way to look at emotional responses from professionals.

Rational considerations

Remediation is considered a measurable outcome that alongside apology, remorse and insight will help the panel determine whether the professional is genuine.

Frequent repeated actions suggest a lack of insight and risk of repeat behaviour.

Experience and/ or seniority of a professional can be an aggravating or mitigating factor particularly for cases involving incompetence.

Proportionality

Participants considered there are five core principles which are key to proportionate panel decision making



Equality and diversity

Participants believe that it is possible for a professional to demonstrate honesty, integrity and remediation regardless of cultural barriers. There is some suggestion that the panel should itself be diverse to reflect the diversity of health and care professions and be carefully chosen to include those with life experience.